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Attorney Docket No.: P13148

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CERTIFICATE OF MAILING OR TRANSMISSION

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Date: April 29, 2004


Pamela S. Newton

Re: Patent Application for:
"METHOD AND SYSTEM FOR EXCHANGE OF MULTICALL CAPABILITIES
BETWEEN TERMINAL AND NETWORK"
Serial No. 09/755,108
Attorney Docket No. P13148

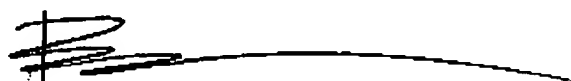
Dear Sir:

Enclosed for filing please find the following items relating to the above-identified application:

- (1) Request for Continued Examination (RCE) Transmittal (1 page);
- (2) Amendment Transmittal Letter (1 page);
- (3) Accompanying Amendment (11 pages); and
- (4) Attachments 1-3 (6 pages).

Should you have any questions or comments concerning this matter, please feel free to contact the undersigned at 972/583-2012.

Sincerely,


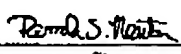


Bill R. Naifeh
Reg. No. 44,962

BRN/psn

Ericsson Inc.
6300 Legacy Drive



AMENDMENT TRANSMITTAL LETTER (Large Entity)			Docket No. P13148		
Applicant(s): Jorg Bruss					
Serial No. 09/755,108	Filing Date January 8, 2001	Examiner Nguyen, Tu X	Group Art Unit 2684		
Invention: METHOD AND SYSTEM FOR EXCHANGE OF MULTICALL CAPABILITIES BETWEEN TERMINAL AND NETWORK					
<u>TO THE ASSISTANT COMMISSIONER FOR PATENTS:</u>					
Transmitted herewith is an amendment in the above-identified application. The fee has been calculated and is transmitted as shown below.					
CLAIMS AS AMENDED					
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE
TOTAL CLAIMS	18 -	34 =	0 x	\$18.00	\$0.00
INDEP. CLAIMS	1 -	8 =	0 x	\$84.00	\$0.00
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT					\$0.00
<div style="display: flex; justify-content: space-between;"><div><input checked="" type="checkbox"/> No additional fee is required for amendment. <input type="checkbox"/> Please charge Deposit Account No. 50-1379 in the amount of \$0.00 A duplicate copy of this sheet is enclosed. <input type="checkbox"/> A check in the amount of _____ to cover the filing fee is enclosed. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 50-1379 A duplicate copy of this sheet is enclosed. <input checked="" type="checkbox"/> Any additional filing fees required under 37 C.F.R. 1.16. <input checked="" type="checkbox"/> Any patent application processing fees under 37 CFR 1.17.</div><div style="text-align: right;">Dated: 4/28/04</div></div>					
<div style="display: flex; justify-content: space-between;"><div> _____ Signature Bill R. Naifeh Reg No. 44,962 Ericsson Inc. 6300 Legacy Drive, M/S EVR 1-C-11 Plano, TX 75024</div><div style="border: 1px solid black; padding: 5px; width: 300px;"><div style="text-align: center; font-size: small;">Certificate of Mailing or Transmission</div><div style="font-size: x-small;">I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage for first class in an envelope addressed to Commissioner for Patents, P. O. Box 1450, Alexandria, VA 22313-1450, or being facsimile transmitted to the USPTO, on the date indicated below.</div><div style="text-align: center; margin-top: 10px;"> _____ Signature Pamela S. Newton 04/29/04 _____ Depositor's Name and Date</div></div></div>					
cc:					

P11LARGE/REV06